PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

MCTO ECTIONS, This	form chauld be used for	or transmitting the ISSI	IE FEE and DUDLICAT	ON FEE (if rami	rad) Block	ke I through 5 sh	and he completed where
appropriate. All further candicated unless corrected maintenance fee notifications.	orrespondence including d below or directed other	or transmitting the 1880 g the Patent, advance or erwise in Block 1, by (a	ders and notification of a specifying a new corres	naintenance fees waspondence address;	ill be mail and/or (b)	led to the current of indicating a separ	ould be completed where correspondence address as ate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailing for any other accordance of the control							
38107	7590 05/15/	2008	****			•	
PHILIPS INTE	LLECTUAL PRO	PERTY & STAN	DARDS I he	cer reby certify that th	inicate on a	Mailing or Transm ransmittal is being	ussion deposited with the United
PHILIPS INTELLECTUAL PROPERTY & STANDARDS 595 MINER ROAD CLEVELAND, OH 44143 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.							
CLEVELAND, C	OH 44143		tran	smitted to the USP	TO (571) 2	73-2885, on the da	te indicated below.
				atricia.			(Depositor's name)
			<u> </u>	Patrice	a A	Hein	(Signature)
				July 18	200	5	(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.		EY DOCKET NO.	CONFIRMATION NO.
10/565,290	10/565,290 01/20/2006		Cornelis L. G. HAM		PHNL030899US		9787
TITLE OF INVENTION: AUTOMATED POSITIONING OF MRI SURFACE COILS							
TITLE OF INVESTIGATION.	11010111111111111111111	ioning of mid boni.	THE COILD				
		······································					
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	e fee T	OTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0		\$1740	08/15/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS				
ARANA, LOUIS M		2831	324-318000				
1. Change of corresponde	nce address or indicatio	n of "Fee Address" (37	2. For printing on the	patent front page, li	st		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence or agents OR, alternatively,							
LI Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.							
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is isted, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	/pe)			
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Koninklijke Philips Electronics N.V. Eindhoven, The Netherlands							
Koninklijke	Pullibs El	lectronics N	I.V. Eind	noven, Th	e Net	herlands	
Please check the appropr	iate assignce category or	categories (will not be p	rinted on the patent):	Individual 🗖 C	Corporation	or other private gro	oup entity Government
4a. The following fec(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
Issue Fee							
Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies							
Advance Order - 1	if of Copies		overpayment, to Dep	osit Account Numb	er 14- 1	270_ (enclose a	n extra copy of this form).
5. Change in Entity Sta	tus (from status indicate is SMALL ENTITY stat		☐ b. Applicant is no lo	naar alaimina SMA	rr exirin	CV status Cas 27 Cl	CD 1 27(a)(2)
• •			, -	-			
interest as shown by the	records of the United Sta	ates Patent and Trademar	k Office.	approant, a cog	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ne assignee or other party in
Authorized Signature	Janke	rudi		Date (T	وادل	2008	
Timed or animated	Thomas N	1. Lundin	The second secon	Danistasi	No.	7 <i>∂0}</i> 48,979	
This collection of inform an application. Confiden	nation is required by 37 6 stiality is governed by 35 d application form to the	UFR 1.311. The information of U.S.C. 122 and 37 CFR	ton is required to obtain or C1.14. This collection is o	r retain a benefit by stimated to take 12	the public minutes to	which is to file (and complete, including	d by the USPTO to process) ng gathering, preparing, and
this form and/or suggest	ions for reducing this bu	arden, should be sent to the	he Chief Information Offi	cer, U.S. Patent and	d Trademat	rk Office, U.S. Dep	ng gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,
Alexandria, Virginia 223	zuginia 22313-1450. 139 313-1450.	O NOT SEND FEES OK	COMPLETED FORMS	IO THIS ADDRES	55. SEND	10: Commissioner	ioi ratents, r.O. Box 1450,

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

OMB 0651-0033

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.